



"Fitness is The Ticket"



Welcome to the Targeting Fitness program. During this six-month period you will improve health and quality of life. Studies show that personnel who stay fit enjoy improved morale, greater productivity, and less sick time.

No matter what your current fitness level may be, this program is designed to accommodate your needs. Health education classes give you the latest update on nutrition, stress management, cardiovascular disease risks, weight control, and fitness. Attendance at these classes is highly encouraged since they help you achieve your fitness goals. Don't forget, the "Targeting Fitness" staff is also available to help you achieve your goals.

For most people, starting a very basic exercise program is safe. If you start gradually, there should be little if any muscle soreness. However, if you answer "yes" to any of the questions on the Health History questionnaires, or if it has been a while since you were active on a regular basis, or you are a man over 40 or a woman over 50, you must get medical clearance before you can participate in the program.

Exercise can be done in groups or on your own. In either case, you can workout during duty hours over this six-month period, mission requirements permitting. The three hours per week must be used for your workouts and not for any other personal leisure activities. Also, the workouts must occur on the installation.

Congratulations for taking the first step towards a healthier you. We hope this will be more than just a six-month trial program for you. We want you to be "fit for life". Please do not hesitate to call with any questions or comments.

Points of contact are SPC Ryan Hunt or Ms. Jennifer Jojola at 678-2795 and MAJ Carlotta Head at 678-6526 or 993-6144.

Fitness is the Ticket!!!

"Targeting Fitness"

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TARGETING FITNESS

GUIDELINES FOR PARTICIPANTS AND SUPERVISORS

1. ELIGIBILITY

- a. Open to all civilian employees, family members, reserve, and active duty.
- b. The program is completely voluntary for civilian employees.
- c. Participation is limited to ONLY ONCE.

2. PARTICIPANTS RESPONSIBILITIES

a. All participants require medical clearance and must provide an approval form or similar statement from a physician that approves the employee's participation in a fitness program. **NO ONE WILL BE PERMITTED TO BEGIN THE PROGRAM WITHOUT PROVIDING AN APPROVAL FORM. NO EXCEPTIONS!**

b. Participants will specify the start and end date to his or her program in a contract with his or her supervisor. The contract documents supervisor's approval for attendance in the exercise portion of the program.

c. Participants will track attendance and participation using the activity roster on page 25 in the participant's manual. (Make sure to make enough copies of the roster to last the entire program.) Have the supervisor approve it, and send it to the Worksite Wellness Coordinator once a month.

f. All participants are required to attend the orientation class, midpoint meeting, and final assessment class. Participants will receive classroom instruction on fitness and nutrition. Other health education will be available during the six months. Participants who have begun a program on their own, and are currently exercising three times per week, will begin their fitness training immediately. Participants new to exercise will be given an orientation to various fitness activities before beginning their program.

GUIDELINES (continued...)

3. SUPERVISOR'S RESPONSIBILITIES

- a. Supervisors should encourage participation in the program.
- b. Supervisors will review and initial employee's monthly attendance rosters.
- c. Supervisors will maintain records to support the participant's involvement in the program (i.e., supervisor's approval form, official registration form). Participants must be officially registered before participating in the program. It is the supervisor's responsibility to ensure the participant is officially registered by receiving the completed registration form.
- d. Consistent with mission requirements, supervisors should allow duty time for employee's participation in training and exercise. If possible, allow participants to combine their exercise hour with either their lunch hour or their morning or afternoon break. This allows the participant time for "cool down" and personal hygiene.
- e. Contact the McAfee Wellness Center with any questions or concerns at 678-2795, or the MAJ Carlotta Head, Chief Nurse McAfee at 678-6526 or 993-6144.

4. PERMITTED ACTIVITIES

- a. Each civilian participant is authorized three hours of excused administrative absences per week for six months to conduct their exercise program. Unused exercise hours may not be carried forward to subsequent weeks nor can these exercise periods be used for any non-duty purpose. Exercise periods are official duty time. Misuse of this time is a workplace infraction, and would be subject to the same disciplinary actions as other similar infractions.
- b. With rare exceptions, participation should be on-post, and must include an aerobic or cardiovascular fitness activity (e.g., brisk walking, jogging, floor aerobics, lap swimming, singles tennis, etc.). An aerobic activity uses large muscle groups usually rhythmically, and is maintained for a long period of time, such as 20-60 minutes for three to five times per week. Combination of activities may be permitted, such as walking on the treadmill for 20 minutes and weight/strength training for 20 minutes.
- c. Activities such as bowling, doubles tennis, and golfing are RECREATIONAL activities and ARE NOT permitted activities.

TARGETING FITNESS

COURSE AGENDA

Date: _____	Physical Fitness Assessment (Pre-test)
Time: _____	Introductory Session Brief
Place: _____	(Wear workout clothes)
Date: _____	Flexibility, Warm Ups, Cool Downs"
Time: _____	Aerobic and Strength Training
Place: _____	(Wear workout clothes)
Date: _____	Nutrition and Weight Control
Time: _____	
Place: _____	
Date: _____	Cardiovascular Disease Risk Factors
Time: _____	
Place: _____	
Date: _____	Midpoint Motivation Check-in Physical Fitness Assessment
Time: _____	(Wear workout clothes)
Place: _____	
Date: _____	Stress Management/Spiritual Fitness
Time: _____	
Place: _____	
Date: _____	Post Test Physical Fitness Assessment
Time: _____	(Wear workout clothes)
Place: _____	

PHYSICAL FITNESS ASSESSMENT SHEET

Initial

 Name Age Date

Resting Heart Rate (beats/min) _____

Resting Blood Pressure (mmHG) _____

<u>Fitness Component</u>	<u>Test</u>	<u>Raw measure</u>	<u>Final</u>
Body Mass Index	Height	_____in	_____index
	Weight	_____lbs	
Cardiovascular (Aerobic)	Step Test	_____pulse	Level_____
Muscular Endurance	1 Min Sit-up	_____reps	#_____ Level_____
	1 Min Push-up	_____reps	#_____ Level_____
Flexibility	Sit & Reach	_____in	#_____ Level_____

- **Strength Ratio = Weight Pushed in lbs/Body Weight in lbs**
- **Body Mass Index = [Body Weight (lbs)/Height (in²)] x 725**

PHYSICAL FITNESS ASSESSMENT SHEET

Midpoint

Name _____ Age _____ Date _____

Resting Heart Rate (beats/min) _____

Resting Blood Pressure (mmHG) _____

<u>Fitness Component</u>	<u>Test</u>	<u>Raw measure</u>	<u>Final</u>
Body Mass Index	Height	_____in	_____index
	Weight	_____lbs	
Cardiovascular (Aerobic)	Step Test	_____pulse	Level_____
Muscular Endurance	1 Min Sit-up	_____reps	#_____ Level_____
	1 Min Push-up	_____reps	#_____ Level_____
Flexibility	Sit & Reach	_____in	#_____ Level_____

- **Strength Ratio = Weight Pushed in lbs/Body Weight in lbs**
- **Body Mass Index = [Body Weight (lbs)/Height (in²)] x 725**

PHYSICAL FITNESS ASSESSMENT SHEET

Final

Name _____ Age _____ Date _____

Resting Heart Rate (beats/min) _____

Resting Blood Pressure (mmHG) _____

<u>Fitness Component</u>	<u>Test</u>	<u>Raw measure</u>	<u>Final</u>
Body Mass Index	Height	_____in	_____index
	Weight	_____lbs	
Cardiovascular (Aerobic)	Step Test	_____pulse	Level_____
Muscular Endurance	1 Min Sit-up	_____reps	#_____ Level_____
	1 Min Push-up	_____reps	#_____ Level_____
Flexibility	Sit & Reach	_____in	#_____ Level_____

- **Strength Ratio = Weight Pushed in lbs/Body Weight in lbs**
- **Body Mass Index = [Body Weight (lbs)/Height (in²)] x 725**

HEALTH STYLE SELF-TEST

Stress Control

	Almost Always	Sometimes	Almost Never
1. I have a job or do other work that I enjoy.	2	1	0
2. I find it easy to relax and express my feelings freely.	2	1	0
3. I recognize early, and prepare for, events or situations likely to be stressful for me.	2	1	0
4. I have close friends, relatives, or others whom I can talk to about personal matters and call on for help when needed.	2	1	0
5. I participate in group activities (such as church and community organizations) or hobbies that I enjoy.	2	1	0

Stress Control Score: _____

Safety

1. I wear a seat belt while riding in a car.	2	1	0
2. I avoid driving while under the influence of alcohol and other drugs.	2	1	0
3. I obey traffic rules and the speed limit when driving.	2	1	0
4. I am careful when using potentially harmful products or substances (such as household cleaners, poisons, and electrical devices).	2	1	0
5. I avoid smoking in bed.	2	1	0

Safety Score: _____

Cigarette Smoking

1. If you *never smoke*, enter a score of 10 for this section and go to the next section on *Alcohol and Drugs*.
2. If you have been smoke-free for 10 years or more and are under the age of 60, enter a score of 10 points and go to the next section on *Alcohol and Drugs*.
3. If you have been smoke-free for 1-9 years, enter a score of 8 points and go to the next section on *Alcohol and Drugs*.
4. If you have been smoke-free for less than a year, enter a score of 6 points and go to the next section on *Alcohol and Drugs*.
5. I avoid smoking cigarettes.
6. I smoke only low tar and nicotine cigarettes or I smoke a pipe or cigar.

2	1	0
2	1	0

Smoking Score: _____

Provided by ODPHP National Health Information Center;
Modified by United States Army Center for Health Promotion and Preventive Medicine

Exercise / Fitness

1. I maintain a desired weight, avoiding overweight and underweight.	2	1	0
2. I do vigorous exercises for 20-30 minutes at least 3 times a week (examples include running, swimming, brisk walking).	2	1	0
3. I do exercise that enhance my muscle tone/strength at least 2 times a week (examples include weight training and calisthenics).	2	1	0
4. I do exercise that enhances my flexibility at least 3 times a week (examples include calf and hamstring stretches).	2	1	0
5. I use part of my leisure time participating in individual, family, or team activities that increase my level of fitness (such as gardening, bowling, golf, and baseball).	2	1	0

Exercise/Fitness Score: _____

Alcohol and Drugs

1. I avoid drinking alcoholic beverages or I drink no more than 1 or 2 drinks a day.	2	1	0
2. I avoid using alcohol or other drugs (especially illegal drugs) as a way of handling stressful situations or the problems in my life.	2	1	0
3. I am careful not to drink alcohol when taking certain medicines (for example, medicine for sleeping, pain, colds, and allergies), or when pregnant.	2	1	0
4. I read and follow the label directions when using prescribed and over-the-counter drugs.	2	1	0
5. I use a designated driver when drinking alcohol.	2	1	0

Alcohol and Drugs Score: _____

Eating Habits

1. I eat a variety of foods each day, such as fruits and vegetables, whole grain breads and cereals, lean meats, dairy products, dry peas and beans, and nuts and seeds.	2	1	0
2. I limit the amount of fat, saturated fat, and cholesterol I eat (including fat on meats, eggs, butter, cream, shortenings, and organ meats, such as liver).	2	1	0
3. I limit the amount of salt I eat by cooking with only small amounts, not adding salt at the table, and avoiding salty snacks.	2	1	0
4. I avoid eating too much sugar (especially frequent snacks of sticky candy or soft drinks).	2	1	0
5. I eat 5 servings of fruits and vegetables a day.	2	1	0

Eating Habits Score: _____

WHAT YOUR SCORES MEAN TO YOU

Scores of 9 and 10 – Excellent! Your answers show that you are aware of the importance of this area to your health. More important, you are putting your knowledge to work for you by practice good health habits. As long as you continue to do so, this area should not pose a serious health risk. It's likely that you are setting an example for your family and friends to follow. Since you got a very high-test score on this part of the test, you may want to consider other areas where your scores indicate room for improvement.

Scores of 6 to 8 – Your health practices in this area are good, but there is room for improvement. Look again at the items you answered with a “Sometimes” or “Almost Never.” What changes can you make to improve your score? Even a small change can often help you achieve better health.

Scores of 3 to 5 – Your health risks are showing! Would you like more information about the risks you are facing and about why it is important for you to change these behaviors? Perhaps you need help in deciding how to successfully make the changes you desire. In either case, help is available.

Scores of 0 to 2 – Obviously you were concerned enough about your health to take the test, but your answers show that may be taking serious and unnecessary risks with your health. Perhaps you are not aware of the risks and what to do about them. You can easily get the information and help you need to improve, if you wish. **The next step is up to you.**

Interpretation of the Fitness Assessment

Introduction

The Health and Fitness Profile is intended to provide a snapshot of your current fitness level and other health-related items. The following information should assist you in interpreting your results.

Heart Rate

Your age, level of cardio respiratory fitness, and certain environmental factors influence your resting heart rate.

Resting heart rate (RHR) becomes progressively lower as aerobic fitness improves, and also tends to lower with increasing age. Anxiety, sleep deprivation, overtraining, caffeine and tobacco use are some of the external factors that may cause elevation of RHR.

Resting Blood Pressure

Blood pressure is the pressure exerted by the blood against the walls of the arteries.

Systolic Blood pressure is the arterial pressure during the contraction phase of the heart cycle and is the first number recorded.

Diastolic Blood Pressure is the arterial pressure during the rest phase of the heart cycle and is the second number recorded.

Optimal resting blood pressure for adults is 120/80, measured in millimeters of mercury (mm Hg).

Hypertension is higher than normal blood pressure; or resting blood pressure greater than 140/90 mm Hg. Hypertension can only be diagnosed after three resting measurements on separate occasions.

Recommended lifestyle changes to improve resting blood pressure are:

- Maintain ideal body weight.
- Limit alcohol to <2 beers or <10 oz wine/day for men and <1 beer or <5 oz wine/day for women.
- Conduct aerobic exercise for 30-40 minutes most days of the week.
- Reduce sodium intake
- Avoid all tobacco.
- Reduce dietary saturated fat and cholesterol.

Blood Chemistries

Glucose

Glucose or blood sugar is supplied to the blood from carbohydrate.

Blood sugar levels below 75 mg/dL or above 110 mg/dL (males); below 65 mg/dL or above 105 mg/dL (females) may indicate glucose intolerance; follow up with a health care provider. Glucose intolerance can be an indicator of a metabolic disorder.

Cholesterol

Cholesterol is a waxy, fat-like substance produced by the body and is an essential building block for life. Sources of cholesterol include foods of animal origin (e.g. meat, milk, eggs and cheese).

Total cholesterol levels can usually be lowered with lifestyle modifications. These modifications include a low fat (<30% total caloric intake), high fiber (25-30-gm/day) diet, regular aerobic exercise and smoking cessation. Genetic factors can also cause high blood cholesterol. Failure to lower total cholesterol using lifestyle modification may indicate a need for drug therapy.

Triglycerides

Excess dietary carbohydrates (sugars and starches) not used for energy are stored as fats and transported by the blood in the form of triglycerides. When coupled with other cholesterol abnormalities, elevated triglyceride levels can indicate a risk for heart disease.

In addition to excess caloric intake, daily alcohol consumption may also elevate triglycerides.

Low Density Lipoproteins (LDL)

LDLs are the principal cholesterol carriers in blood. An elevated LDL level is strongly correlated with a higher incidence of coronary heart disease (CHD).

Reduction of saturated fats and cholesterol in the diet can lower LDL levels in most people. Also, excess caloric intake can affect both total and LDL cholesterol levels.

High Density Lipoproteins (HDL)

HDL serves to transport cholesterol from the blood to the liver where it is metabolized and later excreted from the body, helping to lower cholesterol and plaque formation. It is desirable to have high HDL concentration.

Weight reduction, aerobic exercise and tobacco avoidance are proven methods of raising HDL levels.

Total Cholesterol/HDL Ratio

The TC/HDL ratio examines the blood's ratio between total and 'good' cholesterol. A higher ratio (>4.0) may indicate an increased risk for CHD. Reducing total cholesterol, raising the HDL level, or a combination of the two will improve this ratio.

Recommended lifestyle changes to improve cholesterol values and triglyceride levels:

- High fiber
- Appropriate caloric intake
- Decrease fat intake
- Minimize daily alcohol intake
- Weight reduction
- Regular aerobic exercise
- Tobacco avoidance

Body Composition

The human body can be divided into fat-free and fat mass. Fat-free mass (lean body mass) includes muscle mass, water, bones, blood and organs. It's the body mass that is not composed of fat.

Body Fat

Fat is essential to life. Men's minimum requirement is 3-5% fat mass; women's minimum requirement is 11-14% fat mass. A healthy range of body fat for males is between 19 and 24% and between 26-31% for females.

Safe and effective weight loss can be achieved at 1-2 lbs. /wk.

- *One pound of fat = 3500 calories*
- *2-3 lbs. of fat = 1% body fat*

Waist to Hip Ratio (W:H)

One method of determining body fat distribution is the waist to hip ratio. Individuals who store a greater amount of fat abdominally are at increased risk for many diseases (e.g. hypertension, hyperlipidemia/high cholesterol, Type II diabetes and CHD). Lower W:H ratios indicate more fat storage in the buttocks/thigh region: a pattern associated with difficulty in weight reduction, not CHD. W:H ratio can be reduced with a loss of body fat.

Body Mass Index (BMI)

Body mass index is determined using weight (kg) / height (m²). To use the English measurement system, divide the weight, measured in pounds, by the height in inches squared. Multiply this figure by 725. Body Mass Index = [weight (lbs)/height (in²)]. Increased health risk may be associated with BMI levels greater than 25.0.

Recommended lifestyle changes to improve body composition

- Appropriate caloric intake
- Decrease fat intake

- Regular aerobic exercise

Importance of Aerobic Capacity

Low aerobic capacity values can signify a potential cardiovascular or pulmonary problem. Additionally, low aerobic capacity can signify a low fitness level, which exacerbates many health problems, increases morbidity and mortality risk and lowers quality of life. See FITT on page 18 Chart for aerobic/cardiovascular exercise program.

Strength

Muscular strength is the force that a muscle group applies against a resistance.

Strength can be measured as absolute or relative to one's body weight.

As an individual ages, strength gains importance for these reasons:

- muscles pull on bones at rest and during exercise; strong, balanced muscles facilitate good posture
- weight-bearing exercise, particularly strength training assists in increasing bone density and can decrease the risk of osteoporosis
- increased muscle mass elevates the body's calorie expending capacity during exercise and rest
- lean body mass (muscle) elevates insulin sensitivity, encourages glucose uptake in cells and assists in the maintenance of normal blood glucose levels

In general, strength training is encouraged for everyone. Caution is necessary for those with certain musculoskeletal problems and those diagnosed with high blood pressure. See FITT Chart on page 18 for strength training program.

Flexibility

With age comes a progressive loss of functions/range of motion due to a decrease in flexibility. This decline is attributed to muscle shortening resulting from disuse, age-associated deterioration of joints and collagen degeneration of tendons. Flexibility loss can result in injury from excessive force and a decline in quality of life. See FITT Chart on page 18 for flexibility improvement program.

Preventive Measures for Good Health

Smoking

Cigarette, pipe and cigar smoking greatly increase the risk of cardiopulmonary disease. Additionally, smokeless tobacco is strongly associated with others cancers. Complete tobacco avoidance is strongly encouraged.

Screenings

Men

Over age 40 – Maximal exercise test prior to participation in vigorous exercise

Over age 50 – PSA test and digital exam once/year; begin 45 yrs if at high risk

Women

Over age 50 – Maximal exercise test prior to participation in vigorous exercise

Age 35 and up – Monthly breast examination and yearly mammogram

All women of child-bearing age and older – Yearly Pap smear and cervical examination

Over age 50 – Bone densitometry screen

Post Menopausal – See your health care provider regarding estrogen replacement therapy.

The following pages in the participant guide are to assist you in establishing your exercise and nutrition program. Please contact the Worksite Wellness Coordinator if you have any questions or require help in setting up your program.

FITT (Frequency, Intensity, Time, Type) FACTORS

	Physical Activity	Cardio-respiratory Endurance	Muscular Strength	Muscular Endurance	Flexibility
Frequency	Everyday	3 to 5 times per week	2 to 3 times per week	2 to 3 times per week	<u>Warm-up & Cool-down:</u> Every workout <u>Developmental:</u> 2 to 3 times per week
Intensity	"Moderate"	60 to 85% MHR* "Talk" Test	3 to 7 Repetitions	8 to 12 or more Repetitions	Tension not Pain
Time	30 Minutes or more May be intermittent	30 Minutes or more Continuous	As required	As required	<u>Warm-up & Cool-down:</u> 10 to 15 sec <u>Developmental:</u> 30 to 60 seconds
Type	Vigorous Moderate Light	Running, Swimming, Stair Climbing Rowing, Nordic Track, Bicycling, Jumping Rope, Walking/Hiking	Free Weights Machines Rubber Band/Tubing	Calisthenics, Machines, Free Weights Body Weight Exercises(push-ups, pull-ups, dips)	Passive Static Stretching

* Maximum Heart Rate

Your Exercise Prescription

Aerobic Work

Warm-up _____

Pre-exercise stretches _____

Frequency _____

Intensity _____

Time _____

Type _____

Cool-Down _____

Post-Exercise Stretches _____

Calculate Target Heart Rate Range

(220-age)-resting heart rate x exercise intensity + resting heart rate.

Exercise Intensity:

50 to 60% low moderate

60 to 70% moderate

70 to 80% heavy

> 80% very heavy

EXAMPLE:

Age = 20 Resting HR = 60

Exercise Intensity = 70% to 80%

220-20=200

220-20=200

200-60=140

200-60=140

140x.70=98

140x.80=112

98+60=158

112+60=172

Target Heart Rate = 158 to 172 beats/min

Target Heart Rate Range: _____ (beats/min) or _____ (beats/10 sec)

❖ Progression is generally dictated by increases in

1) duration 2) intensity 3) frequency

❖ Duration increases by 1-2 min/week as tolerated

❖ For intensity changes, see your fitness coordinator

❖ For maximum benefits, perform flexibility routine following exercise

Your Exercise Prescription

Muscular Strength/Endurance Work

Warm-Up first.

Frequency: 2-3x/week (total body workouts) **or**
4-6x/week (split workouts)

Intensity: For toning and muscle endurance, perform between 8-12 repetitions at 60-80% of 1 rep max. For greater strength and size increases, perform 6-8 repetitions. Progressive fatigue should result in difficulty performing last 2-3 repetitions achieving temporary muscle failure.

Time: Exercise 8-10 major muscle groups/1-2 sets per group. If a beginner, begin with 1 set for the first 4 to 6 weeks.

Type: Begin with machines and transition to free-weights if desired.

Major Muscle Groups

Chest	Abdominals
Upper Back	Lower Back
Biceps	Quadriceps
Triceps	Hamstrings
Gluteals	Gastrocnemius

- Cool-down for at least 5 minutes post training
- For maximum benefits, flexibility exercises should be performed following exercise
- Allow 48 hours between training sessions, but not more than 72 hours.

Your Exercise Prescription

Flexibility Work

Frequency: 3-7x/week

Intensity: Stretch to a point of mild discomfort...never pain

Time: 10-15 seconds for warm-up/cool-down
> 30 seconds for development
2-5x per muscle group

Type: Static stretching. As a minimum, focus on 8-10 major muscle groups

Pay extra attention to low back and hamstring muscles.

Always release muscle between stretches.

Never bounce or perform ballistic stretching. Active stretching is acceptable prior to exercise, however most flexibility benefits are derived from static stretches performed following exercise.

Dietary Recommendations

Daily Caloric Intake

Body weight x 10 = resting metabolic rate

Add your physical activity:

- sedentary: 20-30%
- moderately active: 40-50% (2-4 exercise sessions per wk)
- very active: 60-80% (5 or more exercise sessions per wk)

Example:

140 (lbs.) x 10 = 1400

1400 x .4 (40% for moderately active) = 560

1400 + 560 = 1960 calories/day for weight maintenance

To lose weight, subtract 500 calories.

1960 – 500 = 1460 calories/day for weight loss

NOTE: These are only guidelines for caloric intake. Your daily caloric needs may be more or less depending on your activity level, body composition, and present health status.

[Calculate Caloric Intake here](#)

TARGETING FITNESS

GOAL SHEET

- X Set realistic goals!! (Lose weight, Develop skills to manage stress, Increase endurance)
- X Make sure you follow through with the rewards you set, but only if you reach your goals.

My Long Term 6-month GOALS are: _____

My Reward will be: _____

Short Term GOALS:

<u>MONTH</u>	<u>GOAL 1</u>	<u>GOAL 2</u>	<u>GOAL 3</u>	<u>GOAL 4</u>	<u>REWARD</u>
ONE					
TWO					
THREE					
FOUR					
FIVE					
SIX					

Daily Training Log Aerobic Fitness

Date: _____

Type: _____

Duration: _____

Intensity: (*E.H.R.) _____
 (**R.H.R.) _____

Comments: _____

Nutrition Notes

Nutrition Check

Dairy ☐ ☐ ☐

Meat ☐ ☐ ☐

Fruits ☐ ☐ ☐

Veg. ☐ ☐ ☐ ☐ ☐

Grains ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

Fats ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

Water ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

1 box = 1 serving
 1 box = 10 grams of fat
 (for Fats Category)

**Exercise Heart Rate – Pulse during exercise.*

***Resting Heart Rate – Pulse during rest after cool-down from exercise.*

Success Check

Cardio ☐

Strength ☐

Flexibility ☐

Water ☐

Other ☐

"Targeting Fitness"

Activity Roster

Record All Gym Visits, Health Education Classes, Etc and Return to: McAfee US Army

Health Clinic Wellness Center;

(Fax) 678-8681

By the 20th Day of Each Month

-----*Make copies before using.*-----

Participant name: _____ Supervisors Signature _____

Month: _____

DATE	ACTIVITY	TIME	LOCATION

Fitness Opportunities
At
White Sands Missile Range

Bell Gymnasium 678-3374

\$1.00 for civilians that do NOT live on Post
Or 20 uses for \$17.00

Hours; Monday- Thursday 0530 – 2000

Compresses Friday 0900 – 1700

Working Friday 0530 – 1900

Saturday & Sunday 0900 – 1700

All Holidays 0900 – 1300

Closed Thanksgiving, Christmas & New Year's Day

Fitness Areas

- Weight room
- Cycle room
- Aerobic room
- Racquetball courts
- Tennis courts
- Sauna (male & Female)

Classes

- Pilates – (Tue. & Thurs. 1130-1230) (Aug. 2 – Sept. 8th)
After Sept. 8th it will start again after a break
- Spinning – (Mon. & Wed. 1200 – 1240) (June 27th – Aug. 1st)
After Aug. 1st it will start again after a break
- Yoga – (Tue. 1645 – 1745) (June 7th – Aug. 23rd)
After Aug. 23rd it will start again after a break
- Karate for Adults – (Mon. thru Thurs. 1100- 1130)

Exercise Trail call Outdoor Rec. 678-1713

No charge. Outdoors by Volunteer Park

Approximately 2.5 miles from start to finish

Terrain- packed gravel

16 Exercise stations

Aquatic Center/Pool 678-1068

\$1.00 per visit for everyone. (closed Mondays)

Or 20 visits for \$17.00

- Open Swim – (Tue. thru Fri. 1300 – 1900)
(Sat. & Sun. 1200 – 1900)
- Swim lessons available
- Lap swimming – for the whole pool – (Tue. thru Fri. 0930 – 1300)

- Or - One lap lane open at ALL times during pool hours.
- Water Aerobics – (wed. & Thurs. 1645 – 1730)
6 weeks in length \$3.00 per class
OR Pre-registration = \$24.00 classes run year round.
 - Video learning while you swim.
Watch videos on swim techniques,
Have your stroke videotaped and then critiqued.

Track – more info. Call 678-3374

No charge. In front of elementary school

¼ mile Track

- 4 times around = 1 mile